

# Case Management Guidance For Billing and Documentation



Behavioral  
Health  
Division

Case management services may be billed using either the monthly unit or the 15-minute unit. To assist case managers with documenting all billable services provided, the Division is providing the following guidance for documenting and billing services regardless if a case manager utilizes the 15 minute unit or the monthly unit.

## Case Management Billing

Each participant's Individual Budget Amount (IBA) will include \$3,226.32 per year for case management services. Case management may be billed using either the monthly unit or 15 minute unit for the ABI, Child, Comprehensive and Supports waivers. No additional units may be requested for a participant's plan and no case management units may be switched to any other waiver service.

When utilizing the 15 minute unit, some participants may require more assistance in a particular month. Case managers should ensure that units are provided appropriately, so there will not be a shortfall for the plan year.

The Case Management Monthly Notes will require documentation of those case management activities which are considered billable.

## Allowable Case Management Billing Activities

### Home Visit

- **Monthly approximate time for billing:** Thirty (30) minutes to one (1) hour. Time is approximate and may be more or less depending on the circumstances. Travel time is included in the rate and cannot be billed separately. *Home visits over an hour should indicate the specific reason such as a team meeting taking place in the home or a specific crisis that is being addressed.*
- The Division has available a form in which to complete documentation. This form is located on the Division's website using the following link:  
<http://www.health.wyo.gov/ddd/cmforms.html>. The form is a word document that may be downloaded. All text fields expand and should be expanded to allow for documentation of a specific category to be included within one section.
- **A monthly home visit is required for all participants when utilizing the monthly unit. When utilizing the 15-minute unit, the monthly visit is only required for those participants receiving any type of residential services, including residential habilitation, supported living, individual habilitation, and special family habilitation home. For participants that don't receive one of those services, a quarterly home visit shall be required and is described in the next bullet. The team may request that additional visits be allowed for participants that only receive a quarterly home visit.**

### Guidelines for the home visit:

The participant must be present during the home visit and the visit shall take place in the home. In some extenuating circumstances, such as if a participant is admitted to a hospital or nursing home and a home visit cannot be completed, the case manager may bill for other case management services provided in the month, ***only if utilizing the 15 minute-unit***, however the case notes must address why the home visit could not be completed. When utilizing the monthly unit, the case manager may not bill if a home visit cannot be completed. If a participant plans on going out of state such as a vacation, the home visit should be planned prior to the participant leaving.

Home visit documentation shall include the following:

- A review of the condition of the environment (is it kept clean and uncluttered and free from health and safety concerns), overall condition of participant (appropriate clothing for weather, well kempt, appears healthy/happy).
- Discussion with the participant and/or provider staff regarding any current medical or behavior concerns.
- When applicable, discussion with the participant regarding employment options or outcomes.
- When applicable, discussion with the participant/parent regarding school attendance or concerns with school.
- Community outings that the participant attended during the month along with any planned outings.
- When applicable, how objective training is being implemented, if the training is successful, if it requires revision and/or any additional concerns.
- When applicable, discussion with participant and/or provider staff regarding the Positive Behavior Support Plan (PBSP)
- **When utilizing the 15-minute unit, a quarterly home visit is required for participants receiving non-residential services.** Required documentation includes discussion with participant/guardian regarding satisfaction or desired changes of services and areas of concern. Documentation shall also include any areas identified in the above bullet, if applicable. If requested by the team, home visits for non-residential participants may occur more frequently. Participants who do not require a monthly home visit should, at minimum, receive a phone call or e-mail from the case manager for monitoring of health, safety and satisfaction.
- **Travel to and from a home visit is not billable**, only the actual time spent in the home completing case management duties is billable. Please note travel time is built into the rate to cover travel costs associated with case management duties.

*The participant/participant's parent, when applicable, shall sign off that the home visit occurred, the duration of the visit and the date of the home visit utilizing the Division's Home Visit/Observation form. In cases where the participant is unable to sign, the provider/provider staff may complete and sign off on the form.*

## **Plan of Care and other Required Reports**

**Monthly Approximate Time for Billing: Two (2) to six (6) hours** depending on the number and complexity of protocols and added services. Time is approximate and may be more or less depending on the circumstances.

- Drafting plan of care documents
- Meeting with plan of care team to discuss specific details of the plan of care (face to face or on the phone)
- Annual and six month plan of care meeting
- Completion of Quarterly review

## **Monitoring Plan of Care**

**Monthly Approximate Time for Billing: Thirty (30) minutes to three (3) hours.** Time is approximate and may be more or less depending on the circumstances.

- Reviewing documentation and billing for all waiver services which includes self-directed services. Self-directed service reviews shall include a review of all self-directed provider timesheets for each participant. The case manager will ensure providers are following Medicaid Documentation Standards and services are being provided within the scope and frequency as specified in the plan of care. Monitoring includes an assessment of the quality and effectiveness of services and supports for participants. *Provider documentation reviewed is for the prior month.*
- Review of objective progress for applicable services.
- Completion of 2<sup>nd</sup> line monitoring requirements including, but not limited to: review of medication assistance records or other documentation on medications or medical treatments.
- Review of incident reports and completion of filing critical incidents if applicable.
- Follow-Up to any previous issues identified such as issues with employment, objective completion, providers.
- Monitoring of Positive Behavior Support Plans (PBSP) if applicable. This shall include a review of all documentation to ensure the PBSP is being implemented as written.

## **Service Observation**

**Quarterly/Semi-Annually Approximate Time for Billing: Thirty (30) minutes to three (3) hours.** Time is approximate and may be more or less depending on the circumstances.

- Any waiver services defined as habilitative, including self-directed services should be observed and documented at least quarterly. (Only the service observation is billable. Please note travel time is built into the current rate.)
- All other waiver services that are defined as non-habilitative, including non-habilitative services provided through self-direction shall be observed at minimum every six months.
- Case management documentation shall include discussion with participant and staff regarding how service is going, and observation of goal completion, when applicable.
- *The provider/provider staff shall sign off that the waiver service was observed and the date of observation utilizing the Division's Home Visit/Observation form.*

## **Participant Specific Training**

**Yearly or as needed. Approximate Time for Billing: Thirty (30) minutes to three (3) hours.** Time is approximate and may be more or less depending on the circumstances.

- Training providers, including self-directed providers on the individual plan of care and any supplemental documentation such as protocols and positive behavior support plan.

## **Meetings with Participants, Guardian(s), Family and Backup Case Managers**

**Monthly Approximate Time for Billing: Thirty (30) minutes to three (3) hours.** Time is approximate and may be more or less depending on the circumstances.

- This includes discussions regarding satisfaction with services, possible needed changes and/or concerns.

## **Advocacy and Referral**

**Monthly Approximate Time for Billing: Fifteen (15) minutes to one (1) hour.** Time is approximate and may be more or less depending on the circumstances.

- Includes assisting a participant in accessing non-waiver community support services such as public housing, Department of Family Services for assistance with food stamps or other available public assistance. This also may include participating in Individual Education Plan (IEP) or Division of Vocational Rehabilitation (DVR) meetings when a more appropriate natural or paid support is not available. *This does not include transportation time to or from a community support resource.*

### **Crisis Intervention Coordination**

**Monthly Approximate Time for Billing: Fifteen (15) minutes to one (1) hour.** Time is approximate and may be more or less depending on the circumstances.

- Includes coordination with the participant, and team to develop possible resolutions as well as providing pertinent background information to other treating professionals. This does not include actual direct support to a participant when they are in crisis.

### **Coordination of Natural Supports**

**Monthly Approximate Time for Billing: Fifteen (15) minutes to one (1) hour.** Time is approximate and may be more or less depending on the circumstances.

- Discussions with the participant, team members, and members of the community to offer assistance when additional non waiver supports are needed.

### **Back-up Case Managers**

**Quarterly meetings shall be held with the primary case manager's back-up. Quarterly Approximate Time for Billing: Fifteen (15) minutes to one (1) hour.** Time is approximate and may be more or less depending on the circumstances.

- Includes but is not limited to: discussions regarding all services participants are receiving including self-direction, any current concerns or issues including medical concerns, the PBSP, and objectives.
- Case managers utilizing the 15-minute unit may assign a small number of units on the participant's plan for the back-up case manager so the back-up case manager may bill for services provided during the absence of the primary case manager. However, only one case manager may bill for the quarterly meetings.
- Case managers utilizing the monthly unit may not assign any units to a back-up case manager unless there will be an absence of one (1) month or longer.
- Back-up case managers are to be utilized on a temporary basis due to the absence of the primary case manager including, but not limited to illness, vacation, and emergencies. Extended absences of the primary case manager shall be on a case by case basis and prior approved by the Division. All documentation of work completed by a back-up shall be included with the monthly billing as a separate document and signed by the back-up including the reasons for why the back-up is documenting case management services.

## Tracking Documentation and Units Used

Case managers track utilization of units for each participant. The use of a spreadsheet and documentation form may help case managers with documenting services they are completing on a daily basis. For case managers utilizing the 15-minute unit, time may be combined for several activities to equal a 15 minute unit. The sample spreadsheet included assists in documenting units of billable time.

Case Management tracking form.xlsx - Microsoft Excel

File Home Insert Page Layout Formulas Data Review View

Clipboard Font Alignment Number Styles Cells

Case Management Monthly Participant Name: Month:

Date	Start Time	Stop Time	Minutes	Activities

## **Activities That Are Not Billable**

### **Taking participants to social events or outings**

- Transportation to and from the restaurant and eating with the participant would not be billable under case management. Other examples that would not be billable as case management would be going to a movie, shopping or community event with a participant. *If billable case management services are being provided at a restaurant, such as discussing possible community resources or waiver services, only the actual meeting time would be billable.*

### **Taking participants to medical appointments**

- Service provider or an individual that is part of a participant's natural support network should assist with medical appointments... Exceptions may be surgery consults or appointments necessary to assure the health and safety of the participant and only in instances where no other natural or paid supports are appropriate.

### **Completion of any task normally completed by a Representative Payee**

- This would include assisting a participant with paying bills or reviewing bank statements and would not be billable under case management.

### **Providing any type of direct support to a participant**

- Providing any type of other waiver service at the same time is not billable under case management.

### **Participant no shows**

- Effective communication is crucial to ensuring the participant will be in attendance for scheduled home visits or another activities such as a service observations, Case managers cannot bill when a participant is a no-show.

### **Knowledge Enrichment**

- Continuing education and professional growth, which includes additional college courses, attending conferences and seminars are critical activities for maintaining knowledge of best practices.